

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

DMFI PAC

ADDRESS (number and street)

1023 31st Street, NW

Suite 530

Washington

DC

20007

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00710848

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

01

2020

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

03

31

2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Lebin, Jennifer, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Lebin, Jennifer, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

04

14

2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

DMFI PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
01		01		2020

To:

M M	/	D D	/	Y Y Y Y
03		31		2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																				
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2020</td></tr></table>	Y	Y	Y	Y	Y	2020						<table><tr><td colspan="5"></td></tr><tr><td colspan="5">2217785.26</td></tr></table>						2217785.26				
Y	Y	Y	Y	Y																		
2020																						
2217785.26																						
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5"></td></tr><tr><td colspan="5">2217785.26</td></tr></table>						2217785.26															
2217785.26																						
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5"></td></tr><tr><td colspan="5">923323.00</td></tr></table>						923323.00					<table><tr><td colspan="5"></td></tr><tr><td colspan="5">923323.00</td></tr></table>						923323.00				
923323.00																						
923323.00																						
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5"></td></tr><tr><td colspan="5">3141108.26</td></tr></table>						3141108.26					<table><tr><td colspan="5"></td></tr><tr><td colspan="5">3141108.26</td></tr></table>						3141108.26				
3141108.26																						
3141108.26																						
<hr/>																						
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5"></td></tr><tr><td colspan="5">1621499.99</td></tr></table>						1621499.99					<table><tr><td colspan="5"></td></tr><tr><td colspan="5">1621499.99</td></tr></table>						1621499.99				
1621499.99																						
1621499.99																						
<hr/>																						
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5"></td></tr><tr><td colspan="5">1519608.27</td></tr></table>						1519608.27					<table><tr><td colspan="5"></td></tr><tr><td colspan="5">1519608.27</td></tr></table>						1519608.27				
1519608.27																						
1519608.27																						
<hr/>																						
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5"></td></tr><tr><td colspan="5">0.00</td></tr></table>						0.00															
0.00																						
<hr/>																						
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5"></td></tr><tr><td colspan="5">35084.36</td></tr></table>						35084.36															
35084.36																						



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

DMFI PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	0

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	155951.00	155951.00
(ii) Unitemized .....	4372.00	4372.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	160323.00	160323.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	160323.00	160323.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	763000.00	763000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	923323.00	923323.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	923323.00	923323.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	10088.00	10088.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10088.00	10088.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	16000.00
24. Independent Expenditures (use Schedule E) .....	1400000.00	1400000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	5000.00	5000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	5000.00	5000.00
29. Other Disbursements (Including Non-Federal Donations).....	190411.99	190411.99
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1621499.99	1621499.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1621499.99	1621499.99

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	160323.00	160323.00
34. Total Contribution Refunds (from Line 28(d)) .....	5000.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	155323.00	155323.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	10088.00	10088.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	10088.00	10088.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Agatston, Sari, , ,**

Mailing Address 1633 N View Dr

City  
Miami Beach

State  
FL

Zip Code  
33140-4251

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQFG7G5**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Aptman, Lowell, , ,**

Mailing Address 225 Central Park W  
Apt 301

City  
New York

State  
NY

Zip Code  
10024-6028

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AmTrust Financial Services

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2020

**Transaction ID : VVC9XQG23N5**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Bakalarz, Ronald, , ,**

Mailing Address 20165 NE 39th Pl  
Apt 804

City  
Miami

State  
FL

Zip Code  
33180-3421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Stanton SAS

Occupation (for Individual)  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQF6EP8**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Becker, David, , ,**

Mailing Address 100 Idlewood Rd

City  
Kentfield

State  
CA

Zip Code  
94904-2728

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Becker Charitable Trust

Occupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2020

**Transaction ID : VVC9XQFZRX9**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Berman, Gary, , ,**

Mailing Address 5410 Edson Ln  
Ste 220

City  
Rockville

State  
MD

Zip Code  
20852-3195

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Berman Enterprises

Occupation (for Individual)  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQDWM2**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Brooks, Joel, , ,**

Mailing Address 3 Old Wagon Ln

City  
Old Westbury

State  
NY

Zip Code  
11568-1045

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1036.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2020

**Transaction ID : VVC9XQG23Y6**

Amount of Each Receipt this Period

36.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

2036.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Brooks, Joel, , ,**

Mailing Address 3 Old Wagon Ln

City  
Old Westbury

State  
NY

Zip Code  
11568-1045

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1036.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2020

**Transaction ID : VVC9XQG23Z4**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Catz, Sarit, , ,**

Mailing Address 27 Long Hill Rd

City  
Basking Ridge

State  
NJ

Zip Code  
07920-4018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Eldion

Occupation (for Individual)  
Writer/Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQF6ES1**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Chanales, Sheldon, , ,**

Mailing Address 384 Rutland Ave

City  
Teaneck

State  
NJ

Zip Code  
07666-2842

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Herrick, Feinstein LLP

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2020

**Transaction ID : VVC9XQD31D1**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6250.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chanales, Sheldon, , ,

Mailing Address 384 Rutland Ave

City  
TeaneckState  
NJZip Code  
07666-2842FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Herrick, Feinstein LLPOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2020

Transaction ID : VVC9XQF6F72

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chanales, Sheldon, , ,

Mailing Address 384 Rutland Ave

City  
TeaneckState  
NJZip Code  
07666-2842FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Herrick, Feinstein LLPOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2020

Transaction ID : VVC9XQGXS7

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cohen, Louise, , ,

Mailing Address 22 Byron Ln

City  
LarchmontState  
NYZip Code  
10538-1618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2020

Transaction ID : VVC9XQH1FH3

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

5500.00

TOTAL This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cohn, Ann, , ,

Mailing Address 15 Birch Dr

City  
Plainview

State  
NY

Zip Code  
11803-2902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Douglas Elliman

Occupation (for Individual)  
Real Estate Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2020

Transaction ID : VVC9XQGEKM5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cooper, Milton, , ,

Mailing Address 6 Red Ground Rd

City  
Old Westbury

State  
NY

Zip Code  
11568-1120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Kimco Realty

Occupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2020

Transaction ID : VVC9XQFH8J0

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Davis, Tony, , ,

Mailing Address 2831 N Pine Grove Ave

City  
Chicago

State  
IL

Zip Code  
60657-6109

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Linden Capital Partners

Occupation (for Individual)  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

Transaction ID : VVC9XQFG7J1

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Dresner, Linda, C, ,**

Mailing Address 970 Shirley Rd

City  
Birmingham

State  
MI

Zip Code  
48009-3730

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2020

**Transaction ID : VVC9XQFG7K8**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Geduld, David, , ,**

Mailing Address 20155 NE 38th Ct  
Apt 503

City  
Aventura

State  
FL

Zip Code  
33180-3198

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Geduld & Associates

Occupation (for Individual)  
Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQF6EQ6**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Gessner, Douglas, , ,**

Mailing Address 300 N La Salle Dr

City  
Chicago

State  
IL

Zip Code  
60654-3406

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Kirkland & Ellis

Occupation (for Individual)  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2020

**Transaction ID : VVC9XQGEKN3**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goldenhersh, Richard, , ,

Mailing Address PO Box 23184

City  
BellevilleState  
ILZip Code  
62223-0184FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2020

Transaction ID : VVC9XQDFJR9

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goldenhersh, Richard, , ,

Mailing Address PO Box 23184

City  
BellevilleState  
ILZip Code  
62223-0184FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2020

Transaction ID : VVC9XQF6EN0

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goldstein, Richard, , ,

Mailing Address 4550 N Park Ave  
Apt 210City  
Chevy ChaseState  
MDZip Code  
20815-7235FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Nixon PeabodyOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2020

Transaction ID : VVC9XQFZRZ5

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Goldstein, Richard, , ,**

Mailing Address 4550 N Park Ave  
Apt 210

City  
Chevy Chase

State  
MD

Zip Code  
20815-7235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Nixon Peabody

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 26 / 2020

**Transaction ID : VVC9XQHFZ53**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Greenberg, Lawrence, D, ,**

Mailing Address 4 Nottingham Ln

City

Weston

State

MA

Zip Code

02493-1344

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2020

**Transaction ID : VVC9XQGXB6**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Gross, Gary, L, ,**

Mailing Address 14300 Ridge Rd

City

North Royalton

State

OH

Zip Code

44133-4936

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Gross Builders

Occupation (for Individual)

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2020

**Transaction ID : VVC9XQF6EF2**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Gross, Harley, I, ,**

Mailing Address 14300 Ridge Rd

City

North Royalton

State

OH

Zip Code

44133-4936

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Gross Builders

Occupation (for Individual)

Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2020

**Transaction ID : VVC9XQF6EG0**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hackman, Michael, , ,**

Mailing Address 11111 Santa Monica Blvd

City

Los Angeles

State

CA

Zip Code

90025-3333

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Hackman Capital

Occupation (for Individual)

Real Estate Investor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQFH8H2**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hellring, Larry, , ,**

Mailing Address 2901 S Bayshore Dr

Apt 2G

City

Miami

State

FL

Zip Code

33133-6018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2020

**Transaction ID : VVC9XQHFZH8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

10250.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Horvitz, Michael, , ,**

Mailing Address 1100 Superior Ave E  
Ste 1105

City  
Cleveland

State  
OH

Zip Code  
44114-2546

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2020

**Transaction ID : VVC9XQF6EK4**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kaiser, Philip, , ,**

Mailing Address 2718 S Florence Ave

City  
Tulsa

State  
OK

Zip Code  
74114-5737

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Restaurateur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2020

**Transaction ID : VVC9XQFG7H3**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kaplan, James, , ,**

Mailing Address 2821 N Pine Grove Ave

City  
Chicago

State  
IL

Zip Code  
60657-6109

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Quarles & Brady LLP

Occupation (for Individual)  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2020

**Transaction ID : VVC9XQHFZA2**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Kapner, Hilary, , ,**

Mailing Address 6625 Kenhill Rd

City  
Bethesda

State  
MD

Zip Code  
20817-6013

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2020

**Transaction ID : VVC9XQG2443**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Katz, Kay, , ,**

Mailing Address 2639 Twin Birch Rd

City  
Hanover

State  
MD

Zip Code  
21076-2053

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2020

**Transaction ID : VVC9XQHFZ87**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Katz, Kay, , ,**

Mailing Address 2639 Twin Birch Rd

City  
Hanover

State  
MD

Zip Code  
21076-2053

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2020

**Transaction ID : VVC9XQHFZ94**

Amount of Each Receipt this Period

15.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5265.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Klein, Roger, , ,**

Mailing Address 63 Beethoven Ave

City  
Waban

State  
MA

Zip Code  
02468-1732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQDWMN9**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Klinghoffer, Lori, , ,**

Mailing Address 33 Wildwood Dr

City  
Short Hills

State  
NJ

Zip Code  
07078-3027

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Valcor Engineering Corp.

Occupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2020

**Transaction ID : VVC9XQHFZQ5**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kohn, Lisa, , ,**

Mailing Address 16135 Valley Meadow Pl

City  
Encino

State  
CA

Zip Code  
91436-3939

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2020

**Transaction ID : VVC9XQFG7F7**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Levine, Jeffrey, , ,**

Mailing Address 7 Penn Plz  
Ste 600

City  
New York

State  
NY

Zip Code  
10001-3967

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Levine Builders

Occupation (for Individual)  
Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2020

**Transaction ID : VVC9XQHFZP7**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Levine, Richard, , ,**

Mailing Address 37 Sunflower Dr

City

Upper Saddle River

State

NJ

Zip Code

07458-2041

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Valley Hospital

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2020

**Transaction ID : VVC9XQHFZG0**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Levow, Alan, D, ,**

Mailing Address 3400 Peachtree Rd NE  
Ste 1025

City

Atlanta

State

GA

Zip Code

30326-1188

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Crowne Partners

Occupation (for Individual)  
Real Estate Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 29 / 2020

**Transaction ID : VVC9XQD4PV4**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10250.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pachulski, Richard, , ,

Mailing Address 10100 Santa Monica Blvd  
Ste 1300

City  
Los Angeles

State  
CA

Zip Code  
90067-4114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pachulski, Stang, Ziehl &amp; Jones

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

Transaction ID : VVC9XQFH8G4

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rabinowitz, Steve, , ,

Mailing Address 4201 Connecticut Ave NW  
Ste 211

City  
Washington

State  
DC

Zip Code  
20008-1162

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Bluelight Strategies

Occupation (for Individual)  
President & Co-Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2020

Transaction ID : VVC9XQGXA9

Amount of Each Receipt this Period

1100.00

☐ Memo Item

\* In-Kind: Email List

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Robinowitz, Ann, , ,

Mailing Address 226 Osborne Ct

City  
Somerset

State  
NJ

Zip Code  
08873-6020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2020

Transaction ID : VVC9XQD31B5

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

6200.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Robinowitz, Ann, , ,**

Mailing Address 226 Osborne Ct

City  
Somerset

State  
NJ

Zip Code  
08873-6020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2020

**Transaction ID : VVC9XQGEKG6**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Robinowitz, Ann, , ,**

Mailing Address 226 Osborne Ct

City  
Somerset

State  
NJ

Zip Code  
08873-6020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2020

**Transaction ID : VVC9XQHFZJ6**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rubin, Mark, H, ,**

Mailing Address 84 Bigelow Rd

City  
West Newton

State  
MA

Zip Code  
02465-3006

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Maric, Inc.

Occupation (for Individual)  
Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2020

**Transaction ID : VVC9XQFMJX2**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Salimpour, Pejman, , ,**

Mailing Address 15477 Ventura Blvd

City

Sherman Oaks

State

CA

Zip Code

91403-3006

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Medical Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2020

**Transaction ID : VVC9XQG2402**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Schneider, Bruce, H, ,**

Mailing Address 17 Elmridge Dr

City

Scarsdale

State

NY

Zip Code

10583-6627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Stroock

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 17 / 2020

**Transaction ID : VVC9XQC6PZ9**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Schneider, Bruce, H, ,**

Mailing Address 17 Elmridge Dr

City

Scarsdale

State

NY

Zip Code

10583-6627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Stroock

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2020

**Transaction ID : VVC9XQF6EW5**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schlachter, Robert, , ,**

Mailing Address 4431 SW Eleanor Ln

City  
Portland

State  
OR

Zip Code  
97221-1272

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Stoll Berne

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 02 / 2020

**Transaction ID : VVC9XQG2410**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Schlachter, Robert, , ,**

Mailing Address 4431 SW Eleanor Ln

City  
Portland

State  
OR

Zip Code  
97221-1272

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Stoll Berne

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2020

**Transaction ID : VVC9XQGEM18**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Shulman, Dean, , ,**

Mailing Address 9633 Grand Isle Ln

City  
Las Vegas

State  
NV

Zip Code  
89144-0839

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Venture Capitalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2020

**Transaction ID : VVC9XQF6F30**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sider, Donald, , ,**

Mailing Address 6751 N Federal Hwy  
Ste 200

City  
Boca Raton

State  
FL

Zip Code  
33487-1647

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2020

**Transaction ID : VVC9XQGEKF8**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Silk, Gerald, , ,**

Mailing Address 1251 Avenue Of The Americas

City

New York

State

NY

Zip Code

10020-1104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Bernstein Litowitz Berger & Grossmann

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQF6ET9**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sponder, Myron, , ,**

Mailing Address 4550 N Park Ave  
Apt 708

City

Chevy Chase

State

MD

Zip Code

20815-7237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2020

**Transaction ID : VVC9XQD3WD8**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. The Kornfeld Family Trust**

Mailing Address 9460 La Jolla Farms Rd

City  
La Jolla

State  
CA

Zip Code  
92037-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQFGBY2**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Kornfeld, Rick, , ,**

Mailing Address 9460 La Jolla Farms Rd

City  
La Jolla

State  
CA

Zip Code  
92037-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Kitu Systems, Inc.

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQFGBX4**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Viterbi, Alan, , ,**

Mailing Address 4650 Rancho Del Mar Trl

City  
San Diego

State  
CA

Zip Code  
92130-5208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Liquid Environmental Solutions

Occupation (for Individual)  
Executive Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2020

**Transaction ID : VVC9XQFGBW6**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Viterbi, Andrew, J, ,**

Mailing Address 2712 Glenwick Pl

City  
La Jolla

State  
CA

Zip Code  
92037-2040

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Viterbi Group, LLC

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2020

**Transaction ID : VVC9XQFG7M6**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Weintraub, Gail, , ,**

Mailing Address 10776 Wilshire Blvd  
# 26

City  
Los Angeles

State  
CA

Zip Code  
90024-6432

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2020

**Transaction ID : VVC9XQF6ER4**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wuliger, Sandra, H, ,**

Mailing Address 20 Basswood Ln

City  
Chagrin Falls

State  
OH

Zip Code  
44022-1377

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2020

**Transaction ID : VVC9XQGXGD2**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 58

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zakowski, Jan, , ,

Mailing Address 1331 Warnall Ave

City

Los Angeles

State

CA

Zip Code

90024-5355

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Americal Management Company

Occupation (for Individual)

President

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	22	/	2020

Transaction ID : VVC9XQF6EZ9

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Zwick, Martin, , ,

Mailing Address 6816 SE 19th Ave

City

Portland

State

OR

Zip Code

97202-5638

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Portland State University

Occupation (for Individual)

Professor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	04	/	2020

Transaction ID : VVC9XQG23V2

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

5250.00

TOTAL This Period (last page this line number only).....▶

155951.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 58

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Agatston, Sari, , ,

Mailing Address 1633 N View Dr

City  
Miami BeachState  
FLZip Code  
33140-4251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2020

Transaction ID : VVC9XQF6FD7

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Capital Resources Growth, Inc.

Mailing Address 1515 Arapahoe St  
Tower 1, Ste 1500City  
DenverState  
COZip Code  
80202-3150FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2020

Transaction ID : VVC9XQF67E9

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cooper, Milton, , ,

Mailing Address 6 Red Ground Rd

City  
Old WestburyState  
NYZip Code  
11568-1120FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Kimco RealtyOccupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

95000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2020

Transaction ID : VVC9XQF6FB2

Amount of Each Receipt this Period

95000.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

125000.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Davis, Tony, , ,**

Mailing Address 2831 N Pine Grove Ave

City  
Chicago

State  
IL

Zip Code  
60657-6109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Linden Capital Partners

Occupation (for Individual)  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

**02** / **12** / **2020**

**Transaction ID : VVC9XQF6FH9**

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Dresner, Linda, C, ,**

Mailing Address 970 Shirley Rd

City  
Birmingham

State  
MI

Zip Code  
48009-3730

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95000.00

Date of Receipt

**02** / **18** / **2020**

**Transaction ID : VVC9XQE0539**

Amount of Each Receipt this Period

95000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Greenberg, Lawrence, D, ,**

Mailing Address 4 Nottingham Ln

City  
Weston

State  
MA

Zip Code  
02493-1344

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

**03** / **30** / **2020**

**Transaction ID : VVC9XQGXC4**

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 58  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hackman, Michael, , ,**

Mailing Address 11111 Santa Monica Blvd

City  
Los Angeles

State  
CA

Zip Code  
90025-3333

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Hackman Capital

Occupation (for Individual)  
Real Estate Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

**02** / **13** / **2020**

**Transaction ID : VVC9XQF6FE5**

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kaiser, Philip, , ,**

Mailing Address 2718 S Florence Ave

City  
Tulsa

State  
OK

Zip Code  
74114-5737

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Restaurateur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**02** / **12** / **2020**

**Transaction ID : VVC9XQF6FG1**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kapner, Hilary, , ,**

Mailing Address 6625 Kenhill Rd

City  
Bethesda

State  
MD

Zip Code  
20817-6013

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **12** / **2020**

**Transaction ID : VVC9XQG2435**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 58

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Klinghoffer, Lori, , ,

Mailing Address 33 Wildwood Dr

City  
Short HillsState  
NJZip Code  
07078-3027FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Valcor Engineering Corp.Occupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2020

Transaction ID : VVC9XQHFZR3

Amount of Each Receipt this Period

13000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kohn, Lisa, , ,

Mailing Address 16135 Valley Meadow Pl

City  
EncinoState  
CAZip Code  
91436-3939FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2020

Transaction ID : VVC9XQF6FA4

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Levow, Alan, D, ,

Mailing Address 3400 Peachtree Rd NE  
Ste 1025City  
AtlantaState  
GAZip Code  
30326-1188FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Crowne PartnersOccupation (for Individual)  
Real Estate Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2020

Transaction ID : VVC9XQD4PT6

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

38000.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 58

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Levow, Alan, D, ,**

Mailing Address 3400 Peachtree Rd NE  
Ste 1025

City  
Atlanta

State  
GA

Zip Code  
30326-1188

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Crowne Partners

Occupation (for Individual)

Real Estate Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

**03 / 09 / 2020**

**Transaction ID : VVC9XQFYG70**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pachulski, Richard, , ,**

Mailing Address 10100 Santa Monica Blvd  
Ste 1300

City

Los Angeles

State

CA

Zip Code

90067-4114

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Pachulski, Stang, Ziehl & Jones

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

**02 / 13 / 2020**

**Transaction ID : VVC9XQF6FF3**

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rubin, Mark, H, ,**

Mailing Address 84 Bigelow Rd

City

West Newton

State

MA

Zip Code

02465-3006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Maric, Inc.

Occupation (for Individual)

Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

**03 / 03 / 2020**

**Transaction ID : VVC9XQFMJW4**

Amount of Each Receipt this Period

45000.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

90000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 58

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DMFI PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. The Kornfeld Family Trust**

Mailing Address 9460 La Jolla Farms Rd

City  
La JollaState  
CAZip Code  
92037-1127FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2020

Transaction ID : VVC9XQDWMH8

Amount of Each Receipt this Period

45000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kornfeld, Rick, , ,**

Mailing Address 9460 La Jolla Farms Rd

City  
La JollaState  
CAZip Code  
92037-1127FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Kitu Systems, Inc.Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2020

Transaction ID : VVC9XQDKQC4

Amount of Each Receipt this Period

45000.00

☒ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Viterbi, Alan, , ,**

Mailing Address 4650 Rancho Del Mar Trl

City  
San DiegoState  
CAZip Code  
92130-5208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Liquid Environmental SolutionsOccupation (for Individual)  
Executive Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

95000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2020

Transaction ID : VVC9XQDJRH8

Amount of Each Receipt this Period

95000.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

140000.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 58

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Viterbi, Andrew, J, ,**

Mailing Address 2712 Glenwick Pl

City  
La Jolla

State  
CA

Zip Code  
92037-2040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Viterbi Group, LLC

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195000.00

Date of Receipt

**02** / **11** / **2020**

**Transaction ID : VVC9XQDJRG0**

Amount of Each Receipt this Period

95000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Viterbi, Andrew, J, ,**

Mailing Address 2712 Glenwick Pl

City  
La Jolla

State  
CA

Zip Code  
92037-2040

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Viterbi Group, LLC

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195000.00

Date of Receipt

**03** / **10** / **2020**

**Transaction ID : VVC9XQFZSS0**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Zakowski, Jan, , ,**

Mailing Address 1331 Warnall Ave

City  
Los Angeles

State  
CA

Zip Code  
90024-5355

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Americal Management Company

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**02** / **22** / **2020**

**Transaction ID : VVC9XQF6F07**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 58  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Zakowski, Jan, , ,**

Mailing Address 1331 Warnall Ave

City

Los Angeles

State

CA

Zip Code

90024-5355

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Americal Management Company

Occupation (for Individual)

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**02 / 22 / 2020**

**Transaction ID : VVC9XQF6F15**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account - See Refund, Line 29

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**/ /**

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

**/ /**

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

5000.00

**TOTAL** This Period (last page this line number only)..... ►

763000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	0		2	0	2	0		

FEC Identification Number

**C** **Transaction ID : VVBANAPAG**

Amount of Each Disbursement this Period

 2.42☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	7		2	0	2	0		

FEC Identification Number

**C** **Transaction ID : VVBANAPBR**

Amount of Each Disbursement this Period

 9.88☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				2	7		2	0	2	0		

FEC Identification Number

**C** **Transaction ID : VVBANAPDC**

Amount of Each Disbursement this Period

 15.61☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ► 27.91**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPFQ**

Amount of Each Disbursement this Period

7.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPFW**

Amount of Each Disbursement this Period

59.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPFV**

Amount of Each Disbursement this Period

12.86

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

80.76

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2020

FEC Identification Number

**C****Transaction ID : VVBANAPGC**

Amount of Each Disbursement this Period

85.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2020

FEC Identification Number

**C****Transaction ID : VVBANAPH8'**

Amount of Each Disbursement this Period

927.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2020

FEC Identification Number

**C****Transaction ID : VVBANAPHI'**

Amount of Each Disbursement this Period

1382.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2395.33

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2020

FEC Identification Number

**C** **Transaction ID : VVBANAPH8**

Amount of Each Disbursement this Period

 231.50☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2020

FEC Identification Number

**C** **Transaction ID : VVBANAPJW**

Amount of Each Disbursement this Period

 69.52☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2020

FEC Identification Number

**C** **Transaction ID : VVBANAPJY**

Amount of Each Disbursement this Period

 344.80☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 645.82

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2020

FEC Identification Number

**C****Transaction ID : VVBANAPJYI**

Amount of Each Disbursement this Period

197.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2020

FEC Identification Number

**C****Transaction ID : VVBANAPK3I**

Amount of Each Disbursement this Period

282.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2020

FEC Identification Number

**C****Transaction ID : VVBANAPM2**

Amount of Each Disbursement this Period

16.41

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

496.68

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2020

FEC Identification Number

**C****Transaction ID : VVBANAPMZ**

Amount of Each Disbursement this Period

395.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2020

FEC Identification Number

**C****Transaction ID : VVBANAPM3**

Amount of Each Disbursement this Period

19.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2020

FEC Identification Number

**C****Transaction ID : VVBANAPM2**

Amount of Each Disbursement this Period

56.54

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

470.76



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. Democratic Majority for Israel**Mailing Address 1023 31st St NW  
Ste 530City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Database Software & Support

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	5			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPB8**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Democratic Majority for Israel**Mailing Address 1023 31st St NW  
Ste 530City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Staff Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPER**

Amount of Each Disbursement this Period

4729.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Rabinowitz, Steve, , ,**Mailing Address 4201 Connecticut Ave NW  
Ste 211City  
WashingtonState  
DCZip Code  
20008-1162Purpose of Disbursement  
Email List

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVC9XQGXC**

Amount of Each Disbursement this Period

1100.00

\* In-Kind Received

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5929.24

10046.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. BEATTY FOR CONGRESS**

Mailing Address PO Box 172

City  
ColumbusState  
OHZip Code  
43216-0172Purpose of Disbursement  
Contribution

Candidate Name

**BEATTY, JOYCE, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2020

FEC Identification Number

**C** C00507368**Transaction ID : VVBANAPHE**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ENGEL FOR CONGRESS**

Mailing Address 462 California Rd

City  
BronxvilleState  
NYZip Code  
10708-2306Purpose of Disbursement  
Contribution

Candidate Name

**ENGEL, ELIOT L., , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2020  
☒ Primary ☐ General  
☐ Other (specify)

State: NY District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2020

FEC Identification Number

**C** C00236513**Transaction ID : VVBANAPHE**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HASTINGS FOR CONGRESS**

Mailing Address PO Box 100277

City  
Ft LauderdaleState  
FLZip Code  
33310-0277Purpose of Disbursement  
Contribution

Candidate Name

**HASTINGS, ALCEE L., , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2020

FEC Identification Number

**C** C00269837**Transaction ID : VVBANAPM**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00
---------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. JOSH GOTTHEIMER FOR CONGRESS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				2	5					2	0	0

Mailing Address PO Box 584

City  
RidgewoodState  
NJZip Code  
07451-0584Purpose of Disbursement  
Contribution

Candidate Name

**GOTTHEIMER, JOSH, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ

District: 05

Category/  
Type

FEC Identification Number

**C** C00573949**Transaction ID : VVBANAPM3**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KATHY MANNING FOR CONGRESS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	8					2	0	0

Mailing Address PO Box 41197

City  
GreensboroState  
NCZip Code  
27404-1197Purpose of Disbursement  
Contribution

Candidate Name

**MANNING, KATHY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC

District: 06

Category/  
Type

FEC Identification Number

**C** C00662577**Transaction ID : VVBANAPHE**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KWEISI MFUME FOR CONGRESS**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				2	5					2	0	0

Mailing Address PO Box 31649

City  
BaltimoreState  
MDZip Code  
21207-8649Purpose of Disbursement  
Contribution

Candidate Name

**MFUME, KWEISI, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☐ General  
☒ Other (specify) ▼

State: MD

District: 07

Category/  
Type

FEC Identification Number

**C** C00726372**Transaction ID : VVBANAPM3**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. MALONEY FOR CONGRESS**

Mailing Address 49 E 92nd St

City  
New YorkState  
NYZip Code  
10128-1326Purpose of Disbursement  
Contribution

Candidate Name

**MALONEY, CAROLYN B., , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 12

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	5			2	0	2	0		

FEC Identification Number

**C** C00273169**Transaction ID : VVBANAPM3**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TEXANS FOR HENRY CUELLAR CONGRESSIONAL CAMPAIGN**Mailing Address 1519 Washington St  
Ste 200City  
LaredoState  
TXZip Code  
78040-4412Purpose of Disbursement  
Contribution

Candidate Name

**CUELLAR, HENRY R., , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2020  
☒ Primary ☐ General  
☐ Other (specify)

State: TX District: 28

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	0		

FEC Identification Number

**C** C00371302**Transaction ID : VVBANAPHE**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00

16000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. Samuels, Sandor, , ,**

Mailing Address 17527 Embassy Dr

City  
EncinoState  
CAZip Code  
91316-2517Purpose of Disbursement  
Refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2020

FEC Identification Number

**C****Transaction ID : VVBANAPH9**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

**TOTAL** This Period (last page this line number only).....▶

5000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPH8**

Amount of Each Disbursement this Period

5727.50

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	3			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPH8**

Amount of Each Disbursement this Period

395.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPJY**

Amount of Each Disbursement this Period

197.50

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6320.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2020

FEC Identification Number

**C****Transaction ID : VVBANAPMZ**

Amount of Each Disbursement this Period

513.50

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Democratic Majority for Israel**Mailing Address 1023 31st St NW  
Ste 530City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Staff Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2020

FEC Identification Number

**C****Transaction ID : VVBANAPER**

Amount of Each Disbursement this Period

33770.76

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Democratic Majority for Israel**Mailing Address 1023 31st St NW  
Ste 530City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2020

FEC Identification Number

**C****Transaction ID : VVBANAPFT**

Amount of Each Disbursement this Period

8792.38

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

43076.64

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. AB Data**

Mailing Address 600 A B Data Dr

City  
MilwaukeeState  
WIZip Code  
53217-4931Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2020

FEC Identification Number

**C****Transaction ID : VVBANAPME**

Amount of Each Disbursement this Period

3196.65

\* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Berger Hirschberg Strategies**Mailing Address 1010 Vermont Ave NW  
Ste 814City  
WashingtonState  
DCZip Code  
20005-4957Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2020

FEC Identification Number

**C****Transaction ID : VVBANAPME**

Amount of Each Disbursement this Period

3893.81

\* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Red Dawn Trading LLC**

Mailing Address 35 Dogwood Ln

City  
Port WashingtonState  
NYZip Code  
11050-1109Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2020

FEC Identification Number

**C****Transaction ID : VVBANAPME**

Amount of Each Disbursement this Period

1701.92

\* Non-Contribution Account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
------



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. Democratic Majority for Israel**Mailing Address 1023 31st St NW  
Ste 530City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	0		

FEC Identification Number

**C**

Transaction ID : VVBANAPFT

Amount of Each Disbursement this Period

3799.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Mellman Group**Mailing Address 1023 31st St NW  
FI 5City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Rent

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	0		

FEC Identification Number

**C**

Transaction ID : VVBANAPME

Amount of Each Disbursement this Period

3799.20

\* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lebin Yates Consulting**

Mailing Address PO Box 41112

City  
AustinState  
TXZip Code  
78704-0019Purpose of Disbursement  
Compliance Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	2	0		

FEC Identification Number

**C**

Transaction ID : VVBANAPB8

Amount of Each Disbursement this Period

1500.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5299.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. Lebin Yates Consulting**

Mailing Address PO Box 41112

City  
AustinState  
TXZip Code  
78704-0019Purpose of Disbursement  
Compliance Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPG7**

Amount of Each Disbursement this Period

1500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lebin Yates Consulting**

Mailing Address PO Box 41112

City  
AustinState  
TXZip Code  
78704-0019Purpose of Disbursement  
Compliance Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	5			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPM4**

Amount of Each Disbursement this Period

1500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sage Media Planning & Placement, Inc.**

Mailing Address 1322 G St SE

City  
WashingtonState  
DCZip Code  
20003-3021Purpose of Disbursement  
Competitive Tracking Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	2	0		

FEC Identification Number

**C****Transaction ID : VVBANAPGV**

Amount of Each Disbursement this Period

525.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3525.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. Samuels, Sandor, , ,**

Mailing Address 17527 Embassy Dr

City  
EncinoState  
CAZip Code  
91316-2517Purpose of Disbursement  
Refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2020

FEC Identification Number

**C****Transaction ID : VVBANAPH8**

Amount of Each Disbursement this Period

20000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Mellman Group**Mailing Address 1023 31st St NW  
FI 5City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Polling

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2020

FEC Identification Number

**C****Transaction ID : VVBANAPFR**

Amount of Each Disbursement this Period

16500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Mellman Group**Mailing Address 1023 31st St NW  
FI 5City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Polling

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2020

FEC Identification Number

**C****Transaction ID : VVBANAPFR**

Amount of Each Disbursement this Period

16500.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

53000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. The Mellman Group**Mailing Address 1023 31st St NW  
FI 5City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Polling

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2020

FEC Identification Number

**C****Transaction ID : VVBANAPJW**

Amount of Each Disbursement this Period

3500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Mellman Group**Mailing Address 1023 31st St NW  
FI 5City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Polling

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2020

FEC Identification Number

**C****Transaction ID : VVBANAPJW**

Amount of Each Disbursement this Period

3900.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Mellman Group**Mailing Address 1023 31st St NW  
FI 5City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Polling

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2020

FEC Identification Number

**C****Transaction ID : VVBANAPK1**

Amount of Each Disbursement this Period

20000.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

27400.00
----------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. The Mellman Group**Mailing Address 1023 31st St NW  
FI 5City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Polling

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2020

FEC Identification Number

**C****Transaction ID : VVBANAPK1**

Amount of Each Disbursement this Period

6200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Mellman Group**Mailing Address 1023 31st St NW  
FI 5City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Polling

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2020

FEC Identification Number

**C****Transaction ID : VVBANAPK1**

Amount of Each Disbursement this Period

20000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Mellman Group**Mailing Address 1023 31st St NW  
FI 5City  
WashingtonState  
DCZip Code  
20007-4458Purpose of Disbursement  
Polling

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2020

FEC Identification Number

**C****Transaction ID : VVBANAPK1**

Amount of Each Disbursement this Period

20000.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

46200.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**DMFI PAC**

Full Name (Last, First, Middle Initial)

**A. Zakowski, Jan, , ,**

Mailing Address 1331 Warnall Ave

City  
Los AngelesState  
CAZip Code  
90024-5355Purpose of Disbursement  
Refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2020

FEC Identification Number

**C****Transaction ID : VVBANAPHK**

Amount of Each Disbursement this Period

5000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

189820.84

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 55 OF 58

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**DMFI PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Democratic Majority for Israel**

Nature of Debt (Purpose):

Staff Salaries and Shared Expenses

Mailing Address 1023 31st St NW  
Ste 530City  
WashingtonState  
DCZip Code  
20007-4458

Outstanding Balance Beginning This Period

51091.58

Transaction ID : **VV9C59HCKC1**

Amount Incurred This Period

0.00

Payment This Period

51091.58

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Democratic Majority for Israel**

Nature of Debt (Purpose):

Staff Salaries, Rent, and Fundraising  
ExpensesMailing Address 1023 31st St NW  
Ste 530City  
WashingtonState  
DCZip Code  
20007-4458

Outstanding Balance Beginning This Period

0.00

Transaction ID : **VV9C59HCPG9**

Amount Incurred This Period

35084.36

Payment This Period

0.00

Outstanding Balance at Close of This Period

35084.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

35084.36

2) **TOTALS** This Period (last page this line number only)..... ►

35084.36

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

35084.36

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 56 OF 58  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>DMFI PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00710848</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Sage Media Planning &amp; Placement, Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1322 G St SE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">30020.00</div> <b>Transaction ID : VVBANAPC9D5</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003-3021</b>		
Purpose of Expenditure <b>TV Advertising Production</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>SANDERS, BERNARD, , ,</b>			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>IA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">800000.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Sage Media Planning &amp; Placement, Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1322 G St SE</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">709960.00</div> <b>Transaction ID : VVBANAPE4M4</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003-3021</b>		
Purpose of Expenditure <b>TV Advertising Buy</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>SANDERS, BERNARD, , ,</b>			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: <b>IA</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">800000.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	739980.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lebin, Jennifer, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 57 OF 58  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>DMFI PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00710848	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Sage Media Planning &amp; Placement, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 29 / 2020	
Mailing Address 1322 G St SE			Amount <span style="border: 1px solid black; padding: 2px;">60020.00</span>	
City Washington	State DC	Zip Code 20003-3021	Transaction ID : <b>VVBANAPE4N2</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 23 / 2020	
Purpose of Expenditure Digital Advertising		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: SANDERS, BERNARD, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">800000.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Sage Media Planning &amp; Placement, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 15 / 2020	
Mailing Address 1322 G St SE			Amount <span style="border: 1px solid black; padding: 2px;">27493.00</span>	
City Washington	State DC	Zip Code 20003-3021	Transaction ID : <b>VVBANAPG6H1</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 13 / 2020	
Purpose of Expenditure Digital Advertising - Actual Cost		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: SANDERS, BERNARD, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">600000.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">87513.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Lebin, Jennifer, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 14 / 2020	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 58 OF 58  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>DMFI PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00710848	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Sage Media Planning &amp; Placement, Inc.</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 02 / 15 / 2020	
Mailing Address 1322 G St SE		Amount <span style="border: 1px solid black; padding: 2px;">547063.00</span>	
City Washington	State DC	Zip Code 20003-3021	Transaction ID : <b>VVBANAPG6J9</b>
Purpose of Expenditure TV Advertising Buy - Actual Cost		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 02 / 13 / 2020
Name of Federal Candidate: SANDERS, BERNARD, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">600000.00</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Sage Media Planning &amp; Placement, Inc.</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 02 / 15 / 2020	
Mailing Address 1322 G St SE		Amount <span style="border: 1px solid black; padding: 2px;">25444.00</span>	
City Washington	State DC	Zip Code 20003-3021	Transaction ID : <b>VVBANAPG725</b>
Purpose of Expenditure TV Advertising Production - Actual Cost		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 02 / 13 / 2020
Name of Federal Candidate: SANDERS, BERNARD, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">600000.00</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">572507.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"></span>
(c) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">1400000.00</span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lebin, Jennifer, , ,
[Electronically Filed]

Signature \_\_\_\_\_ Date MM / DD / YYYY  
 04 / 14 / 2020